

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>7091</i>	<i>9/29</i>
O.I.P.E. CLASSIFIER		<i>60158 48</i>	<i>10/1/99</i>
FORMALITY REVIEW			<i>10-8-99</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	10/4/02	
2	✓	6/27/02	
3	✓	1/15/04	
4	✓		
5	✓		
6	✓		
7	✓		
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46	✓		
47	✓		
48	✓		
49	✓		
50	✓		

Claim	Final	Original	Date
51	✓	10/4/02	
52	✓	6/27/02	
53	✓	1/15/04	
54	✓		
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98	✓		
99	✓		
100	✓		

Claim	Final	Original	Date
101	✓	10/4/02	
102	✓	6/27/02	
103	✓	1/15/04	
104	✓		
105	✓		
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140	✓		
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146	✓		
147	✓		
148	✓		
149	✓		
150	✓		

If more than 150 claims or 10 actions  
staple additional sheet here

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